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<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b>				Application Number <b>10/568,303</b>		Filing Date <b>04 October, 2006</b>		<input type="checkbox"/> To be Mailed				
Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Applicant(s) <b>LECLERC ET AL.</b>				Page 1 of 2				
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 06/04/2008		AFTER 3RD AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1					51		1				
2		1				52		1				
3		1				53		1				
4		2				54		1				
5		2				55		1				
6		2				56		1				
7		2				57		1				
8		2				58		1				
9		2				59		2				
10		2				60		1				
11		2				61		1				
12		2				62		1				
13		2				63		1				
14		1				64		2				
15		1				65		1				
16		1				66		1				
17		1				67		1				
18		1				68		1				
19		1				69		2				
20		1				70		1				
21		1				71		1				
22		1				72		1				
23		1				73		1				
24		1				74		2				
25		1				75	1					
26		1				76		1				
27		1				77		1				
28		1				78		1				
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30		1				80		1				
31		1				81		1				
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33		1				83		1				
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42		1				92		1				
43		1				93		1				
44		1				94		1				
45		1				95		1				
46		1				96		1				
47		2				97		1				
48		1				98		1				
49		1				99		1				
50		1				100		1				
Total Indep						Total Indep						
Total Depend						Total Depend						
Total Claims						Total Claims						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Part of Paper No20080628-1.

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<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b>				Application Number <b>10/568,303</b>	Filing Date <b>04 October, 2006</b>	Page 2 of 2						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
101	1					151						
102	1					152						
103						153						
104						154						
105						155						
106						156						
107						157						
108						158						
109						159						
110						160						
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143						193						
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146						196						
147						197						
148						198						
149						199						
150						200						
Total Indep	2					Total Indep						
Total Depend		73				Total Depend						
Total Claims		75				Total Claims						

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